



PATENT  
Docket No. 6317.N

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Baldwin et al. ) Group Art Unit: 2621  
                                  )  
Serial No.: 09/896,580       ) Examiner: Unassigned  
                                  )  
Filed: June 29, 2001         ) Confirmation No.: 7868

For: CRYSTALLIZATION AND STRUCTURE OF STAPHYLOCOCCUS AUREUS  
PEPTIDE DEFORMYLASE

SUBMISSION OF DRAWINGS UNDER 37 C.F.R. §1.85

Assistant Commissioner for Patents  
ATTN: BOX PATENT APPLICATION  
Washington D.C. 20231

Sir/Madam:

Attached please find 17 sheets of Drawings for the above-identified patent application. Please contact the undersigned attorney if you have any questions.

CERTIFICATE UNDER 37 C.F.R. 1.10:

The undersigned hereby certifies that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated below and is addressed to the Assistant Commissioner for Patents, Attn: Box Patent Application, Washington, D.C. 20231.

  
SAM HER

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Date of Deposit: AUGUST 19, 2002

August 19, 2002  
Date

Respectfully submitted for

**Baldwin et al.**  
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08-20-02

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We are transmitting the following documents along with this Transmittal Sheet (which is submitted in triplicate):

- An itemized return postcard.  
 A Petition for Extension of Time for \_\_\_\_\_ month(s) and a check in the amount of \$\_\_\_\_\_ for the required fee.  
 A check in the amount of \$\_\_\_\_\_, for \_\_\_\_\_.  
 Other: Preliminary Amendment (9 pgs total, including Appendix A (3 pgs)); Fig.1 w/correction in red; Fig.1 as amended; Fig.10 w/correction in red; Fig.10 as amended; Submission of Drawings under 37 C.F.R. §1.85 (1 pg); and 17 sheets (19 figures) of Formal Drawings.  
 Amendment  No Additional fee is required. \_\_\_\_\_ The fee has been calculated as shown:

Fee Calculation for Claims Pending After Amendment					
	Pending Claims after Amendment (1)	Claims Paid for Earlier (2)	Number of Additional Claims (1-2)	Cost per Additional Claim	Additional Fees Required
Total Claims				x \$18 =	
Independent Claims				x \$84 =	
One or More New Multiple Dependent Claims Presented? If Yes, Add \$280 Here →					
Total Additional Claim Fees Required					

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers and please charge any additional fees or credit overpayment to Deposit Account No. 13-4895. Triplicate copies of this sheet are enclosed.

MUETING, RAASCH & GEBHARDT, P.A.

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CERTIFICATE UNDER 37 CFR §1.10:

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By:   
Name: SAM HER

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